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PATIENT SAFETY THROUGH THE ASPECT OF ACCREDITATION

Context and importance of the problem

By definition, accreditation of hospitals is a “*process of self-evaluation and external evaluation of the health facilities and / or external body in order to estimate accurately measure of the level of performance in relation to predefined standards and the implementation of solutions to continuous improvement.*”(3)

Critically speaking, accreditation is not only related to standards, there are analytical and advisory dimensions of the process, to improve health services. Parallel issues are processed in the field of evidence-based medicine, quality assurance and medical ethics and reduction of medical errors that play a key role in the accreditation process (4). Therefore, accreditation of hospitals is a major component in maintaining patient safety (5,6).

However, there is limited and inconsistent evidence to support the effectiveness of accreditation programs (7). This process is relatively new in Southeast Europe, and therefore the results of the impact the process has on health are yet to be explored.

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Patient safety is defined as “*freedom from accidental injury; ensuring safety for patients includes establishing operational systems and processes that minimize the probability of errors and maximize the probability of intercept and prevent.*” (Institute of Medicine)(8).

The problems with patient safety are documented by the Institute of Medicine (IM) in the report from 1999, where is presented the premise “To err is human.” But that does not satisfy patients who potentially are victims of errors. Since that time, all sectors of the health system are called for to reduce medical errors and harm to patients. There are information published by them that 44.000 from 98.000 persons have died each year from hospital medical errors, and 42% of users and 35% of doctors say that themselves or a member of their family has experienced at least one medical error per day. It is estimated that 40% of medical errors are due to improper alignment during the transitional care, resulting in damage to about 20% of users.

Developing the thinking (mentality)

In 2001, IM had published the report “Crossing the Quality Chasm: A New Health System for the 21st Century.”(9) Here are highlighted system-ic problems in health care that led to bad outcomes: uncoordinated organization within the health system; fragmentation in the delivery of health care that hinders care and removes the feeling of personal responsibility; poor communication and insufficient use of information technology; and failure in all health professionals to work together in providing care that is appropriate, timely and secure.

The report suggests ways of assessing the health system through six goals for care:

- Security
- Timeliness
- Efficiency
- Effectiveness
- Equality and
- Patient orientation

This brief begins with a discussion of long-term healing of relationships in health care and the need to create an overall culture of safety.

Patient safety is the foundation of all accreditation modules. These modules are mainly included in four categories: prevention of hospital-acquired infections, safety use of medications, surgery safety, proper identification of the patient and the treatment area.

Prevention of hospital-acquired infections: the most common cause of prolonged hospital stay are hospital-acquired infections. Given the fact that there are ways to minimize the risk of these adverse events, accreditation standards require detailed definition of procedures to prevent hospital-acquired infections, the indicators for identifying them, methods of reporting and monitoring, and defining ways of prevention from epidemics (10,11).

Safe use of medications: standards require strict eye and estimated medication safety for each patient involved in treatment. This includes the following actions: providing the right medicine, in the correct dose, at the right time and over a sufficiently long period in a way most appropriate for the patient. Through the standards should be improved the knowledge of the patient causes the dosing and side effects thereof. It also includes the evaluation of the need for transfer from one treatment to another. This process helps to avoid skipping doses, doubling the dose, harmful medication interactions, dosage errors and proper adherence to therapy (12).

Safe Surgery: the use of the check list for safe surgery published by the World Health Organization (WHO) minimizes the risk for the other two components of patient safety (13). This list covers the risk of patient misidentification and false localization in the field of surgical treatment. In this context it should be noted the use of clinical guidelines based on evidence that offer security that the patient receives the best available clinical practice with the ability to continuously improve diagnostic and therapeutic measures (14).

And most importantly, the care for patient safety is timely documentation of all procedures during treatment of the patient. Properly kept documentation provides patient care and safety, confidence of health professionals for the continuity of treatment and patient care, appropriate transfer of the patient from one shift to another, providing continuity in the further treatment of the patient and his successful takeover from the chosen doctor.

Complementary part in patient care and its safety is also the information system for monitoring path of the patient from admission to discharge, and all the elements of his treatment. The health care system provides accurate electronic records which is a permanent record of the track of its movement.

The impact of accreditation on patient safety

The planned out of the patient reduces stress for the patient from going out of control health care professionals, family stress continuity of care, especially for the chronically ill. The planned outs covers preparation of the patient and his family, outs preparation plan for continuing care after discharge, completing the documentation for discharge which should contain all the information required for the next segment of keeping the patient's assessment of possible adverse developments in domestic conditions (crashes, errors in diet, physical security, coordination and monitoring of therapy at home).

Accreditation requires written policies and procedures and precise documentation with clearly defined procedures and steps in the process used to treat potential or known safety issues to safely resolving them (15). Various possible solutions and next steps are part of the mission of each accredited hospital that should be constantly striving to improve patient safety through the following ways:

- Forming committees or relevant bodies that will regularly monitor and assess the degree of patient safety, apart from program quality management;
- Conducting studies on patient safety;
- Setting up a patient safety as an objective in programs for quality management;
- A system that has the potential to follow the existing problems in the field of patient safety (repeated surgery for the same problem, adverse events after treatment, complications of therapy, re-admission, prolonged hospital stay or other unplanned events);
- Monitoring the indicators for patient safety by the doctors or the health institution;
- Contacting the hospitals for which data show high rates of patient safety issues.

Accreditation of hospitals brings benefits for everyone: patients, health professionals, health institutions, health insurance fund by reducing unnecessary costs, and positive society in general.

The methods of that are the following:

- Accreditation serves as a valuable supplement to legislation and licensing
- Accreditation always evaluate procedures and processes that are with the highest available evidence, and standards are updated every 2-3 years

- Public health laws can vary, but the standards are consistent for a longer period and they are subject to a positive update and improvement
- Accreditation inspires and encourages health institutions to improve their processes
- Accreditation reduces costs through risk management and prevention of adverse events
- Accreditation Agency is collecting and analyzing the data on the state of health care that will help users and managers to make decisions about the direction of movement of health care
- By the standards that require continuing education and improving the quality of health care, patients / consumers are more confident that the accredited hospital implemented the best and safest health care and their rights given by law to protect the rights of patients are fully transposed into standards (16).

Mandatory accreditation of hospitals at secondary and tertiary level is regulated by the Law for health care of the Republic of Macedonia and offers security to strengthen the mechanisms for control over the quality of health care across the country, creating a model for integrated and organized health care.

Executive summary

The hospitals and health services are vital components of any well-organized and humane society. Hospitals that are accredited should be a place of safety, not only for patients but also for health professionals. The quality of health care is of interest to all relevant factors, including the government, ministries (for health, labor and social policy, finance), professional associations representing doctors and other health professionals, patients' associations, civil society associations, health insurance fund and others.

Some important issues relating to accreditation of hospitals are:

- How can we maintain and promote quality in hospitals and health services;
- The importance of the financial factor;
- What is the perception of health professionals about the importance of hospital accreditation (1);
- What is the attitude of the society in terms of the process;
- What patients expect.

Generally, there are two types of accreditation in the health sector: (2)

- Accreditation of hospitals and health care institutions at national level and
- International accreditation in health

The Government of the Republic of Macedonia enacted a decision to implement the national accreditation process, and in accordance with that national standards have been developed, which were adopted at the session of the Government. The central part of national standards deals with patient safety and protection of health professionals, reporting and prevention of adverse events. This process should be perceived as a positive movement towards better health and greater satisfaction among patients and health professionals.

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